

## Renovator's Job Records Check List

**Firm Name:** \_\_\_\_\_

**Date and Location of Renovation:** \_\_\_\_\_

**Attachments** (check all that apply):

Pre-Renovation Education Form \_\_\_\_\_

D-Lead® Test Form \_\_\_\_\_

LeadCheck® Test Form \_\_\_\_\_

Paint Sample Collection Form \_\_\_\_\_

Workers List \_\_\_\_\_

Work Practices Verification Form \_\_\_\_\_

Cleaning Verification Form \_\_\_\_\_

Recordkeeping/Reporting Form \_\_\_\_\_

**Renovator's Certification (Required ):**

I certify under penalty of law that the above information is true and complete.

Signed: \_\_\_\_\_ Cert# \_\_\_\_\_

Name / Title \_\_\_\_\_ Date \_\_\_\_\_

*[A copy of this record should be provided to the client for their lead records.]*

*This sample form may be used by firms to document compliance with the requirements of the Federal Lead-Based Paint Renovation, Repair, and Painting Program.*

## Pamphlet Receipt

Signature of Owner-occupant

### Renovator's Self Certification Option (for tenant-occupied dwellings only)

\_\_\_\_ **Declined** – I certify that I have made a good faith effort to deliver the lead hazard information pamphlet to the rental dwelling unit listed below at the date and time indicated and that the occupant declined to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit with the occupant.

Attempted Delivery Date

*Note Regarding Mailing Option — As an alternative to delivery in person, you may mail the lead hazard information pamphlet to the owner and/or tenant. Pamphlet must be mailed at least 7 days before renovation. Mailing must be documented by a certificate of mailing from the post office.*

**Owner Information**

Name of Owner/Occupant: _____	
Address: _____	
City: _____	State: _____ Zip code: _____
Contact #: (_____) _____ - _____	Email: _____

**Project Information**

<b>Fill out all of the following information that is available about the Renovation Site</b>	
Renovation Address: _____ Unit# _____	
City: _____	State: _____ Zip code: _____ Phone # (_____) _____ - _____
Brief Project Description:   	

**Certified Firm**

Certified Firm Name: _____	
Address: _____	
City: _____	State: _____ Zip code: _____
Phone #: (_____) _____ - _____	Email: _____
Certified Renovator Name: _____	Date Certified:    /    /

**Test Kit**

LeadCheck® Test Kit    Hybrivet Corporation Lot # _____
---

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

<b>Test Location #</b> _____	Description of test location: _____		
_____			
Result: Is lead present? (Circle only one)	YES	NO	Presumed

**Owner Information**

Name of Owner/Occupant: _____	
Address: _____	
City: _____	State: _____ Zip code: _____
Contact #: (_____) _____ - _____	Email: _____

**Project Information**

<b>Fill out all of the following information that is available about the Renovation Site</b>	
Renovation Address: _____ Unit# _____	
City: _____	State: _____ Zip code: _____ Phone # (_____) _____ - _____
Brief Project Description:   	

**Certified Firm**

Certified Firm Name: _____	
Address: _____	
City: _____	State: _____ Zip code: _____
Phone #: (_____) _____ - _____	Email: _____
Certified Renovator Name: _____	Date Certified:    /    /

**Test Kit**

D-Lead® Paint Test Kit PTKIT-24-1.0	ESCA-Tech, Inc.
Lot # (from Solution 2 Vial) _____	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

<b>Sample #</b> _____	Description of test location: _____		
Result: Is lead present? (Circle only one)			
YES	NO	Presumed	

## Page \_\_ of \_\_

## Renovation Information

## Paint Chip Sample Information

For each sample collected, fill out all of the following information

Sample Identifier: \_\_\_\_\_

Sample Collector Name: \_\_\_\_\_

Sampling Location: \_\_\_\_\_

Sampling site description: \_\_\_\_\_ Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sample Dimensions (cm): \_\_\_\_\_ Calculate Sample Area (cm<sup>2</sup>): \_\_\_\_\_

NLLAP-recognized entity and location: \_\_\_\_\_

Submission date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_ Result Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Page** \_\_\_\_ **of** \_\_\_\_

Submission date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_ Result Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Submission date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_ Result Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Submission date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_ Result Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



[illegible]

## Renovator's Work Practices Record

Date and Location of Renovation: \_\_\_\_\_

Brief Description of Renovation: \_\_\_\_\_

### Work Practices Used (Check all that apply)

#### *All Projects*

- ☐ Warning signs posted at entrance to work area.
- ☐ Work area contained to prevent spread of dust and debris
- ☐ Waste contained on-site and while being transported off-site
- ☐ Work site properly cleaned after renovation
- ☐ Large waste collected; plastic misted, folded dirty side inward, and taped for removal
- ☐ Interior work area surfaces. objects HEPA vacuummed and/or wet cleaned
- ☐ (Additional)
- ☐ (Additional)

#### *Interior*

- ☐ All objects in the work area removed or covered
- ☐ HVAC ducts in the work area closed and covered
- ☐ Windows in the work area closed
- ☐ Doors in the work area closed and sealed
- ☐ Project entry doors to work area covered to allow passage but to prevent spread of dust
- ☐ Floors in the work area covered with taped-down plastic
- ☐ (Additional)
- ☐ (Additional)

#### *Exteriors*

- ☐ Windows in and within 20 feet of the work area closed
- ☐ Doors in and within 20 feet of the work area closed and sealed
- ☐ Ground covered by plastic to 10 feet from work area and adequately anchored at margins
- ☐ If necessary, vertical containment used to prevent migration of dust and debris from property
- ☐ (Additional)
- ☐ (Additional)

Signed: \_\_\_\_\_

Name / Title: \_\_\_\_\_ Date: \_\_\_\_\_



Date and Location of Renovation: \_\_\_\_\_

**Brief Description of Renovation:**

Name(s) of Trained Workers, if used: \_\_\_\_\_

- | name and title | date |
|----------------|------|
|----------------|------|

date

\\RRP\RRP Materials\Classroom\Recordkeeping.wpd Version 2.0